

## Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

THE CHIE	mic 105 cor1	CCIO	n or each violation is specified in the harrative portion of this				
Establishm		1 41	- IV. DRA Kulaway	Telephone Number	Date of Ins (mm/dd/yr		PERMIT #
TINAPI SubShop IIc. DBA Subway  Establishment Address (number and street, city, state, zip code)				<b>-</b>	1/30,	1,0	19-328
				GIO 585 0633	'/'	/ <del>L</del> U	
()wner			Nu Alberton 47150	Purpose:	Follow-up Release Date		
Prakish Kimer Palel				Routine	No 10 days		
Owner's A				2. Follow-up	Summary of Violations:		
				3. Complaint			
Person in C	<u> </u>			4. Pre-Operational	Ic ℧	NC_L	$I R \bigcirc I$
Nick 1		_	, <del></del>	5. Temporary  Menu Type (See back of page)			
Responsibl	e Person's	E-ma	il	6. НАССР	Menu Ty	pe (See back	of page)
Certified F	ood Manag	or		7. Other (list) 1 2 X 3 4 5			
			1/23)		1	<u> </u>	_4 _ 5
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative		AD LA THE N	,	orrected By
		K	•	<del></del>			•
245	NC	-	Observed wising may allowed to dry being	revsid		Corre	e ted
297	NC		Observed for bulb and threads with b	and have brild-up		Cornec	* d
324	NL		Observed 3-comp hoses to be 12" to 1	long			
			-cut to punt backsiphonge				
422	422 NG Observed cont hung on Fiel storage cack						
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